NOTIFICATION OF MULTICANDIDATE STATUS

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(See reverse side for instructions)

This f	orm	should	be	filed	after	the	Commi	ttee	qualifies	as a	multica	ndidate	committee.

1. (a) N	AME OF C	OMMITTEE IN FULL			1			
C	CAPAC	Leadership PAC						
(-)		Street Address Street, NW	2 FEC IDEN	ITIFICATION	NIIMRER			
	Suite 450	Sileei, IVVV	2. FEC IDENTIFICATION NUMBER C00506907					
(c) Cit	ty, State ar	d ZIP Code	3. TYPE OF COMMITTEE (check one)					
V	Vashingto	n	20036	STATE PARTY OTHER				
I certif	y that c	one of the following situation	ons is correct (co	mplete line 4 or 5):	•			
0		S BY AFFILIATION: The o						
C	ommit	tee Name:						
F	EC Ide	ntification Number:						
								
5. S	TATUS	S BY QUALIFICATION:						
	Dei	ow (ONLY State party com	imilitees may lea	Office Sought	State/D	eistrict	Date	
	(:)							
	(i)	AMERISH BERA		House	CA	07	04/12/2012	
	(ii)	MARK TAKANO		House	CA	41	04/12/2012	
	(iii)	BLONG XIONG		House	CA	21	05/23/2012	
	(iv)	GRACE MENG		House	NY	06	06/06/2012	
	(v)	L. TAMMY DUCKWORTH		House	IL	08	06/11/2012	
	on:	gistration: The committee					1 was	
	sur	omitted on:12/02/2011	·					
(0	d) Qu	alification: The committee	e met the above i	requirements on:	06/20/2012		_•	
		e examined this Statement and to the				5.4==		
Vincent		NAME OF TREASURER	SIGNATURE OF T	nlaounen [E	lectronically Fi	-	06/20/2012	
						06/20	0/2012	